

WELL LOG

Job No. 304-7-8
Proposed Plat
ONAMAC

LOCATION: Proposed Plat "ONAMAC" in SE 1/4 SE 1/4, Section 10-31-2

COUNTY: Island

OWNER: Saratoga West, Inc., 2510 Colby Avenue, Everett, Washington

DRILLER: Henry E. Deckmann, Everett, Washington

ENGINEER: James F. King, P.E., 311 State St., Marysville, Washington

DEPTH OF WELL: 246 feet from ground line

DIAMETER: 8 inches

YIELD: See curves dated November 14, 1968

AMOUNT OF CASING: 223'-3" of 8" above screen and 2'-0" casing
welded onto bottom of screen to go to solid
bottom to shut off heaving sand.

AMOUNT OF SCREEN: 21'-7"

SIZE OF SCREEN: #12 screen - 1/8" diameter

SOIL LOG: (Measured from ground line)

0' - 8' Hard-packed gravelly sandy clay with rocks

80' - 135' Clayey sand - dry

135' - 160' Sandy clay - dry (blue clay)

160' - 198' Clayey sand - dry (brown clay)

198' - 224' Clayey sand - begins to get wet @ 210' (brown clay)

224' - 244' Fine Sand - wet

Soil Log Data supplied by Driller.

34B

WELL:

Depth - 246'10" Top of casing Static Depth - 192'
 Dia. - 8"
 Amount of casing - 223'3" - 8"
 *2'0" - 6" Top of casing 10" above ground line.
 Amount of screen - 21'7"
 Size of screen - #12
 To top of screen - 223'3" = 222' - 5" from G.L.
 To bottom of screen - 244'10" from top casing = 244 from G.L.
 Depth of pump - 220'9" During test = 220' from G.L.

* Note: 2' of 6" casing welded onto bottom of screen to go to solid bottom to shut off heaving sand.

WELL LOG: From ground line

0' - 80' Hard-packed gravelly sandy clay/rocks
 80' - 135' Clayey sand - dry
 135' - 160' Sandy clay-dry (Blue clay)
 160' - 198' Clayey sand - dry (Brown clay)
 198' - 224' Clayey sand - Begins to get wet @ 210' (Brown clay)
 224' - 244' Fine sand - wet

WELL TEST

PUMP: Make - Floway with a right angle gear drive
 Size - 6"
 Stages - 7
 Ser. No. - 63-3714

METER: Make - Orifice type
 Size - 2½" with 4" pipe
 Calibrated in - G.P.M./inch. ($24.00 \times \sqrt{H}$) H = height in inches
 Ser. No. - (Cook - Tables)

TESTING CONTRACTOR: A.G. Kounkel, Stanwood, WA
 OPERATOR: Karl

Drilling Contractor: Henry Deckmann

Water Information:

8.33 Lbs./gal.
 7.5 Gals./cu. ft.
 62.4 Lbs./ cu.ft.

Water samples

Approximately 3 hours and approximately 6 hours after start time and temperature.



WATER WELL REPORT FOR AN EXISTING WELL



INSTRUCTIONS:

Use this form if an original water well report was NEVER filed or is MISSING from Ecology records.

YOUR WELL MUST BE PROPERLY TAGGED PRIOR TO SUBMITTING THIS FORM. Please fill in all blanks as completely as possible. If information is not known leave blank. After completing, mail the original form to: WA State Department of Ecology, PO Box 47600, Olympia, WA, 98504-7600, ATTN: Marian Bruner.

CURRENT USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Municipal <input type="checkbox"/> DeWater <input type="checkbox"/> Irrigation <input type="checkbox"/> Test Well <input type="checkbox"/> Other		Unique Ecology Well ID Tag No. <u>AGA 700</u>																	
DIMENSIONS: Diameter of well <u>8</u> inches. Depth of completed well <u>246</u> ft. if known.		Water Right? If yes, attach copy <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <u>G1 23572</u>																	
CONSTRUCTION DETAILS Liner installed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown Type: <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete Liner <input type="checkbox"/> Other <input type="checkbox"/> Unknown		Property Owner Name <u>Onamac Maintenance Associates</u> Well Street Address <u>Crescent Drive</u> City <u>Camano Island</u> County: <u>Island</u> Tax Parcel No. <u>S7610-00-00046-0</u>																	
Perforations <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown SIZE of perfs _____ in. by _____ in. and no. of perfs _____ from _____ ft. to _____ ft.		LOCATION An accurate location of your well is very important. The Township, Range, Section and 1/4, 1/4 can be found on your legal description or through your county assessor's office. Sec <u>10</u> Twn <u>31N</u> R <u>2</u>																	
Screens: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown Mfr's name _____ Type: <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other Diam. _____ Slot Size <u>12</u> from <u>223</u> ft. to <u>244</u> ft.		This square represents one section of land, which is approx. 640 acres. Within this section, circle the letter that best represents the location of the well within this section.																	
Gravel/Filter Packed: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown Materials placed from _____ ft. to _____ ft.		<table border="1"> <tr> <td>D</td> <td>C</td> <td>B</td> <td>A</td> </tr> <tr> <td>E</td> <td>F</td> <td>G</td> <td>H</td> </tr> <tr> <td>M</td> <td>L</td> <td>K</td> <td>J</td> </tr> <tr> <td>N</td> <td>P</td> <td>Q</td> <td><u>R</u></td> </tr> </table>		D	C	B	A	E	F	G	H	M	L	K	J	N	P	Q	<u>R</u>
D	C	B	A																
E	F	G	H																
M	L	K	J																
N	P	Q	<u>R</u>																
Surface Seal: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown If know, to what depth _____ ft. Materials used if known: <input type="checkbox"/> Bentonite <input type="checkbox"/> Cement		Latitude/Longitude Note: Section, Township, Range still REQUIRED Lat Deg <u>48</u> Lat Min/Sec <u>11.06147</u> Long Deg <u>122</u> Long Min/Sec <u>31.86324</u>																	
PUMP: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Mfr's Name _____ Type: <u>Submersible</u> H.P. <u>10</u>		<input checked="" type="checkbox"/> GPS <input type="checkbox"/> Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Computer Generated																	
WATER LEVELS: Land-surface elevation above mean sea level <u>192</u> ft. Static Level <u>192</u> ft. below top of casing Date measured <u>30 Oct 1968</u> Artesian pressure _____ lbs. per square inch Date measured _____ Well head has cap? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Shut off valve? <input type="checkbox"/> Yes <input type="checkbox"/> No		Additional Information, if available: <input checked="" type="checkbox"/> Location marked on topographic map (please attach) <input type="checkbox"/> Location marked on air photo (please attach)																	
WELL TESTS: Drawdown is amount water level is lowered below static level. Was a pump test made? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach copy <input type="checkbox"/> Unknown Yield: <u>100</u> gal./min. with <u>25</u> ft. drawdown after <u>5</u> hrs.																			

CERTIFICATION: The information reported above is true to the best of my knowledge and belief.

☐ Driller ☐ Engineer ☐ Property Owner ☒ Other

Name Vin Sherman

Signature Vin Sherman

Driller License No. Island County Health Dept

Date Signed 28 January 2011

Drilling Company Henry Deckmann

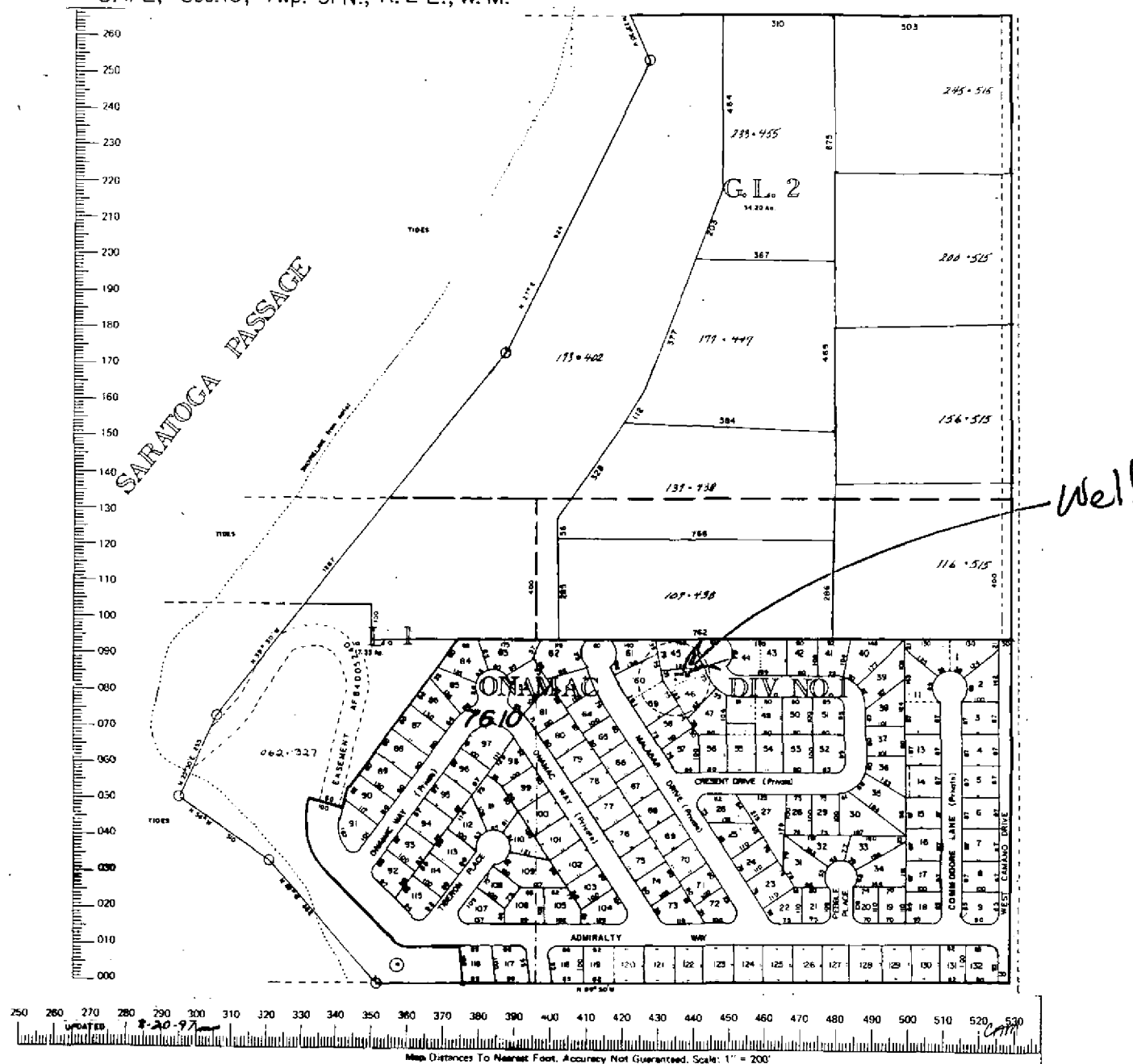
Address of person completing this form:

PO Box 5000

City, State, Zip Coupeville, WA 98239-5000

DO NOT USE AS A LEGAL DOCUMENT
ACCURACY NOT GUARANTEED

S. 1/2, Sec. 10, Twp. 31 N., R. 2 E., W. M.



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

PERMIT

TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

- ☐ Surface Water (Issued in accordance with the provisions of Chapter 117, Laws of Washington for 1917, and amendments thereto, and the rules and regulations of the Department of Ecology.)
- ☒ Ground Water (Issued in accordance with the provisions of Chapter 263, Laws of Washington for 1945, and amendments thereto, and the rules and regulations of the Department of Ecology.)

PRIORITY DATE	APPLICATION NUMBER	PERMIT NUMBER	CERTIFICATE NUMBER
March 27, 1980	G1-23572	G1-23572P	

NAME

ONAMAC PARTNERS, EIMER C. HOVIK

ADDRESS (STREET)

326 N.E. Camano Drive

(CITY)

Camano Island

(STATE)

Washington

(ZIP CODE)

98292

The applicant is, pursuant to the Report of Examination which has been accepted by the applicant, hereby granted a permit to appropriate the following described public waters of the State of Washington, subject to existing rights and to the limitations and provisions set out herein.

PUBLIC WATER TO BE APPROPRIATED

SOURCE
Well

TRIBUTARY OF (IF SURFACE WATERS)

MAXIMUM CUBIC FEET PER SECOND

MAXIMUM GALLONS PER MINUTE
100MAXIMUM ACRE-FEET PER YEAR
66.0

QUANTITY, TYPE OF USE, PERIOD OF USE

Community domestic supply - continuously

LOCATION OF DIVERSION/WITHDRAWAL

APPROXIMATE LOCATION OF DIVERSION-WITHDRAWAL

885 feet north and 925 feet west from SE corner of Sec. 10

LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION)	SECTION	TOWNSHIP N.	RANGE, (E. OR W.) W.M.	W.R.I.A.	COUNTY
NW $\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$	10	31	2	6	Island

RECORDED PLATTED PROPERTY

LOT	BLOCK	OF (GIVE NAME OF PLAT OR ADDITION)
46		Plat of Onamac

LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

Plat of Onamac, Camano Island, Island County as recorded in Volume 10 of Plats on Page 58
Records of Island County.

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

DESCRIPTION OF PROPOSED WORKS

DEVELOPMENT SCHEDULE

IN PROJECT BY THIS DATE:
Started

COMPLETE PROJECT BY THIS DATE:
August 31, 1982

WATER PUT TO FULL USE BY THIS DATE:
August 31, 1983

PROVISIONS

When the chloride concentration exceeds 250 mg/L, the withdrawal rate shall be reduced or the pump setting raised to reduce the chloride level to below 250 mg/L.

Installation and maintenance of an access port as described in Ground Water Bulletin No. 1 is required. An air line and gauge may be installed in addition to the access port.

The amount of water granted is a maximum limit that shall not be exceeded and the water user shall be entitled only to that amount of water within the specified limit that is beneficially used and required.

A certificate of water right will not be issued until a final investigation is made.

This permit shall be subject to cancellation should the permittee fail to comply with the above development schedule and/or fail to give notice to the Department of Ecology on forms provided by that Department documenting such compliance.

Given under my hand and the seal of this office at Redmond Washington, this 31st day of August, 1981.

Department of Ecology

ENGINEERING DATA

OK

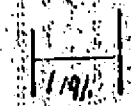
by

ROBERT K. McCORMICK, Regional Manager

A

ONAMAC WATER SYSTEM

S



S

2.5 MI./INCH
13200' / INCH

Onamac Point

Rocks *

BM 252

10

15

Camano
(BM 47)

Piles

ROAD

75

300

300

200

200

100

